		on to identify your case:	Fill in this information to
		ptcy Court for the:	United States Bankruptcy (
		of Ohio	Northern District of C
	Chapter you are filing under:  ✓ Chapter 7  Chapter 11  Chapter 12  Chapter 13	r:	Case number (If known):

# Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Identify	Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):					
1. Yo	1. Your full name							
gov ide you pas Brii ide	rite the name that is on your vernment-issued picture entification (for example, ur driver's license or ssport).  ing your picture entification to your meeting the the trustee.	Rachal First name Elizabeth Middle name Motich Last name	First name  Middle name  Last name  Suffix (Sr., Jr., II, III)					
ha yea Inc	I other names you nve used in the last 8 ears clude your married or aiden names.							
yo nu Ind Ide	nly the last 4 digits of our Social Security imber or federal dividual Taxpayer entification number	xxx - xx - 8 2 1 2 OR 9 xx - xx	xxx - xx					

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in	✓ I have not used any business names or EINs.	I have not used any business names or EINs.
	the last 8 years	Business name	Business name
	Include trade names and doing business as names	Business name	Business name
		EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		28 1/2 31st St SW Apt 4	
		Number Street	Number Street
		Barberton OH 44203	
		City State ZIP Code Summit County	City State ZIP Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain.	☐ I have another reason. Explain.
		(See 28 U.S.C. § 1408.)	(See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case

7.	The chapter of the Bankruptcy Code you are choosing to file under	for Bank	one. (For a brief description of cruptcy (Form 2010)). Also, g pter 7 pter 11 pter 12 pter 13			
8.	How you will pay the fee	loca your sub: with  I ne App  I rec By I less pay	aw, a judge may, but is not than 150% of the official	allments. If you choo Pay The Filing Fee in the following the poverty line that app f you choose this opt	ay. Typically, if you or money order. If rney may pay with ose this option, sign in Installments (Officest this option only your fee, and may lies to your family sion, you must fill out or money.	are paying the fee your attorney is a credit card or check an and attach the cial Form 103A).  If you are filing for Chapter 7. do so only if your income is size and you are unable to ut the Application to Have the
	Have you filed for bankruptcy within the last 8 years?	Distri	ct		When	Case number Case number Case number
10.	affiliate? Di	ebtorebtor		When	Cas	nip to you  se number, if known  to you  number, if known
11.	Do you rent your residence?	V No. ☐Yes.	Go to line 12.  Has your landlord obtained  No. Go to line 12.  Yes. Fill out <i>Initial Stat</i> this bankruptcy petition	ement About an Evictio		<i>You</i> (Form 101A) and file it with

Official Form 101

Report About Any Businesses You Own as a Sole Proprietor Part 3: 12. Are you a sole proprietor No. Go to Part 4. of any full- or part-time Yes. Name and location of business business? A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnership, or Number Street If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. City State **7IP Code** Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your Chapter 11 of the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if **Bankruptcy Code and** any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. For a definition of small business debtor, see ☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in 11 U.S.C. § 101(51D). the Bankruptcy Code. LYes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any **✓** No property that poses or is Yes. What is the hazard? alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs If immediate attention is needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property?

Official Form 101

#### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities

#### About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a certificate of completion. certificate of completion. Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. plan, if any, that you developed with the agency. I received a briefing from an approved credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment plan, if any. I certify that I asked for credit counseling I certify that I asked for credit counseling services from an approved agency, but was services from an approved agency, but was unable to obtain those services during the 7 unable to obtain those services during the 7 days after I made my request, and exigent days after I made my request, and exigent circumstances merit a 30-day temporary waiver circumstances merit a 30-day temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances bankruptcy, and what exigent circumstances required you to file this case. required you to file this case. Your case may be dismissed if the court is Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. still receive a briefing within 30 days after you file. You must file a certificate from the approved You must file a certificate from the approved agency, along with a copy of the payment plan you agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case developed, if any. If you do not do so, your case may be dismissed. may be dismissed. Any extension of the 30-day deadline is granted Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 only for cause and is limited to a maximum of 15 I am not required to receive a briefing about credit counseling because of: credit counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. Disability. My physical disability causes me My physical disability causes me to be unable to participate in a to be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone.

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

Pa	rt 6: Answer These Ques	stions for Reporting Purposes				
	What kind of debts do you have?	<ul> <li>16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.</li> <li>16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17.</li> <li>16c. State the type of debts you owe that are not consumer debts or business debts.</li> </ul>				
17.	Are you filing under Chapter 7?  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	No. I am not filing under Chapter 7 administrative expenses a Yes	. Do you estimate that after	r any exempt property is excluded and ailable to distribute to unsecured creditors?	>	
	How many creditors do you estimate that you owe?	1-49 50-99 100-199 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000		
19.	How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	on \$1,000,000,001-\$10 bill lion \$10,000,000,001-\$50 b	lion	
	How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	on \$1,000,000,001-\$10 bill lion \$10,000,000,001-\$50 b	lion	
Pa	rt 7: Sign Below					
Fo	r you	correct.  If I have chosen to file under Chapt	er 7, I am aware that I may	proceed, if eligible, under Chapter 7, 11,12 aunder each chapter, and I choose to proce	2, or 13	
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
		/s/ Rachal Elizabeth Motic	n 🗶	•		
		Signature of Debtor 1		Signature of Debtor 2		
		Executed on04/25/2019		Executed on		

Official Form 101

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Date	04/25/2019
	MM / DD /YYYY
OLL	44010
	44312
State	ZIP Code
Email address rebec	ca@sremacklaw.com
ОН	
	OH State

Fill in this information to identify your case:							
Debtor 1	Rachal Elizabeth Motich						
	First Name	Middle Name	Last Name	-			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States B	Bankruptcy Court for the	e: Northern District of Ohio					
Case number	(If known)		<del>_</del>				

Check if this is ar
amended filing

# Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

# Part 1: **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B...... \$565.00 1b. Copy line 62, Total personal property, from Schedule A/B..... 1c. Copy line 63, Total of all property on Schedule A/B..... \$565.00 Part 2: Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$0.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D...... 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... \$24,156.97 \$24,156.97 Your total liabilities Part 3: Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$770.00 Copy your combined monthly income from line 12 of Schedule I..... 5. Schedule J: Your Expenses (Official Form 106J) \$750.00 Copy your monthly expenses from line 22c of Schedule J.....

Debtor 1

Middle Name

me	Jar	20	1
me	Var	20	- 1

Case number (if known)\_

#### Part 4: Answer These Questions for Administrative and Statistical Records

6.	Are you filing f	or bankrup	tcy under (	Chapters 7	, 11, or	13?
----	------------------	------------	-------------	------------	----------	-----

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

### 7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

433.33

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on <i>Schedule E/F</i> , copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
9d. Student loans. (Copy line 6f.)	\$
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$
9g. <b>Total.</b> Add lines 9a through 9f.	\$

Fill in this information to identify your case and this	s filing:		
Rachal Elizabeth Motich			
Pebtor 1 First Name Middle Name	Last Name		
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Northern District of Oh	io		
Case number	, ,	_	_
			Check if this is an amended filing
000115			amended ming
Official Form 106A/B			
Schedule A/B: Propert	у		12/15
In each category, separately list and describe item category where you think it fits best. Be as compleresponsible for supplying correct information. If m write your name and case number (if known). Answer	ete and accurate as possible. If two married people ore space is needed, attach a separate sheet to the ver every question.	e are filing together, bo is form. On the top of a	th are equally
Part 1: Describe Each Residence, Building,  1. Do you own or have any legal or equitable interes			
No. Go to Part 2.	st in any residence, building, land, or similar prop	erty:	
Yes. Where is the property?	What is the property? Check all that apply.	Do not deduct secured cla	ime or exemptions. But
	Single-family home	the amount of any secured Creditors Who Have Claim	d claims on <i>Schedule D:</i>
1.1. Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative	Current value of the	
	Manufactured or mobile home		portion you own?
	Land	\$	\$
200	Investment property Timeshare	Describe the nature of interest (such as feet)	
City State ZIP Code	Other	the entireties, or a life	
	Who has an interest in the property? Check one.		
	Debtor 1 only	Check if this is co	mmunity property
County	Debtor 2 only Debtor 1 and Debtor 2 only		
	At least one of the debtors and another		
	Other information you wish to add about this it property identification number:	em, such as local	
	property identification number.		
If you own or have more than one, list here:	What is the property? Check all that apply.	Do not deduct secured cla	
1.2	Single-family home Duplex or multi-unit building	the amount of any secured Creditors Who Have Claim	
Street address, if available, or other description	Condominium or cooperative	Current value of the	Current value of the
	Manufactured or mobile home	entire property?	portion you own?
	Land Investment property	\$	\$
City State ZIP Code	Timeshare	Describe the nature of	
	U Other	interest (such as fee the entireties, or a life	
	Who has an interest in the property? Check one.		
County	Debtor 1 only Debtor 2 only		
County	Debtor 1 and Debtor 2 only	☐ Check if this is co	mmunity property
	At least one of the debtors and another	(see instructions)	
	Other information you wish to add about this ite property identification number:	m, such as local	

or exemptions. Put ims on Schedule D: ecured by Property.  Irrent value of the rtion you own?  Dur ownership ple, tenancy by tate), if known.
0.00
or exemptions. Put ims on Schedule D: ecured by Property.
rrent value of the rtion you own?
300.00
or exemptions. Put ims on <i>Schedule D:</i>
urrent value of the ortion you own?
orriman orriginal or

Other information:  At least one of the debtors and another  Check if this is community property (see instructions)  If you own or have more than one, list here:  4.2. Make:  Model:  Debtor 1 only  Debtor 2 only  At least one of the debtors and another  entire property? portion you own?  \$  Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.					
Model:		Make:			
Approximate mileage:		Model:			
Approximate mileage: At least one of the debtors and another  Other information:    Check if this is community property (see instructions)		Year:	•		
Check if this is community property (see instructions)		Approximate mileage:		entire property?	portion you own?
Make:		Other information:	<u></u>	•	•
Make:   Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information:   Check if this is community property (see instructions)    4. Watercraft, alrcraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories    Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories    Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories    Who has an interest in the property? Check one.   Do not deduct secured claims or exemptions. Put the amount of any secured claims or schedule 0; Creditors Who there Claims Secured by Property.    Other information:   Check if this is community property (see instructions)    If you own or have more than one, list here:    42. Make:   Who has an interest in the property? Check one.   Do not deduct secured claims or exemptions. Put the amount of any secured claims or exemp				\$	\$
Model: Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Approximate mileage: Approximate mileage: At least one of the debtors and another  Other information: Check if this is community property (see instructions)  4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 3 only Debtor 3 only Debtor 4 only		Make:	Who has an interest in the property? Check one.		
Peter 2 only Approximate mileage:			Debtor 1 only		
Approximate mileage: At least one of the debtors and another  Other information: Check if this is community property (see instructions)  4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  Vess  4.1. Make: Debtor 1 only			•		
Other information:    Check if this is community property (see instructions)			•		
Check if this is community property (see instructions)			At least one of the debtors and another		
Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories    No		Cities information.		\$	\$
4.2. Make:		Year:	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Current value of the entire property?	Current value of the portion you own?
Model: Debtor 1 only the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Year: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Check if this is community property (see instructions)  Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages  \$ 300.00	If yo	u own or have more than one, list here:			
Model: Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 2 only Debtor 1 and Debtor 3 only Debtor 3 only Debtor 1 and Debtor 3 only Debtor 3 only Debtor 4 least one of the debtors and another    Current value of the entire property?	4.2.	Make:	Who has an interest in the property? Check one.		
Other information:  Other information:  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Current value of the entire property?  Current value of the portion you own?  Check if this is community property (see instructions)  5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages		Model:			
Other information:  At least one of the debtors and another  Check if this is community property (see instructions)  5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages		Year:		Current value of the	Current value of the
Check if this is community property (see instructions)  5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages		Other information:		entire property?	portion you own?
5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages				Φ.	Φ.
				\$	\$
you have attached for Part 2. Write that number here					\$ 300.00
	you	have attached for Part 2. Write that numb	per here	→	T

# Part 3: Describe Your Personal and Household Items

Do	you own or have any legal or equitable interest in any of the following items?	portion you own?
6.	Household goods and furnishings	Do not deduct secured claims or exemptions.
	Examples: Major appliances, furniture, linens, china, kitchenware  Miscellaneous household items	1
	□ No □ Yes. Describe	
	Tes. Describe	140.00
		\$
7.	Electronics	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	
	collections; electronic devices including cell phones, cameras, media players, games  No	I
	Yes. Describe	\$ 0.00
		Φ
8.	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	_
	☑ No	0.00
	Yes. Describe	\$_0.00
9.	Equipment for sports and hobbies	_
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	☑ No	0.00
	Yes. Describe	\$_0.00
10	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	•
	☑ No □	\$ 0.00
	Yes. Describe	\$
11	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	1
	□ No Miscellaneous wearing apparel □ Yes. Describe	\$ 100.00
	Tes. Describe	\$
10	lauraley	
12	. Jewelry  Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	gold, silver	
	☑ No	s 0.00
	Yes. Describe	φ
13	. Non-farm animals  Examples: Dogs, cats, birds, horses	
	☑ No	_
	Yes. Describe	\$0.00
4.4	Any other percent and household items you did not already list including any health side you did not list	
14	Any other personal and household items you did not already list, including any health aids you did not list	]
	☑ No ☐ Yes. Give specific	\$0.00
	information	\$
15	. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	\$ 240.00
	for Part 3. Write that number here	Ψ

page 4\_of 10

# Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
16. <b>Cash</b> Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition  No	
☑ Yes	\$ <u>25.00</u>
<ul> <li>17. Deposits of money         Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage house and other similar institutions. If you have multiple accounts with the same institution, list each.         ☑ No</li></ul>	S,
17.1. Checking account:	\$
17.2. Checking account:	
17.3. Savings account:	
17.4. Savings account:	
17.5. Certificates of deposit:	
17.6. Other financial account:	
17.7. Other financial account:	
17.8. Other financial account:	\$
17.9. Other financial account:	\$
18. Bonds, mutual funds, or publicly traded stocks  Examples: Bond funds, investment accounts with brokerage firms, money market accounts  No Yes Institution or issuer name:  19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture  No Yes. Give specific information about them	\$\$ \$\$ \$
Name of entity: % of ownershi	p:
	_% \$ \$
	_% \$
	_% \$

20. Government and corporate bonds and other negotiable and non-negotiable instruments	
Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.	
☑ No	
Yes. Give specific information about	
them	
	\$
	\$
	- Ψ \$
21. Retirement or pension accounts	_ *
Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
☑ No	
Yes. List each account separately. Institution name: Type of account:	
401(k) or similar plan:	\$
Pension plan:	\$
IRA:	¢
	- Φ
	-
Keogh:	
Additional account:	. \$
Additional account:	- \$
22. <b>Security deposits and prepayments</b> Your share of all unused deposits you have made so that you may continue service or use from a company <i>Examples:</i> Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others	
☑ No	
Yes Institution name or individual:	\$
Electric:	\$
Gas:	Ψ \$
Heating oil:	\$
Rental unit:	\$
Prepaid rent:	\$
Telephone:	\$
Water:	\$
Rented furniture:	Ψ
Other:	Ψ
23. <b>Annuities</b> (A contract for a periodic payment of money to you, either for life or for a number of years)	
✓ No	
Yes Issuer name and description:	
	\$
	\$
	\$

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	te tuition program.	
☑ No		
Yes Institution name and description. Separately file the records of any interest	ests.11 U.S.C. § 521(c)	:
		\$
		Φ
25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights of exercisable for your benefit	r powers	1
☑ No		
Yes. Give specific		\$0.00
information about them		\$0.00
26. Patents, copyrights, trademarks, trade secrets, and other intellectual property		
Examples: Internet domain names, websites, proceeds from royalties and licensing agreements		
☑ No		
Yes. Give specific		
information about them		\$ <u>0.00</u>
27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, profes	sional licenses	
☑ No		
Yes. Give specific information about them		\$0.00
Money or property owed to you?		Current value of the
		portion you own?  Do not deduct secured claims or exemptions.
28 Tax refunds owed to you		Do not deduct secured
28. Tax refunds owed to you		Do not deduct secured
☑ No		Do not deduct secured claims or exemptions.
✓ No  ☐ Yes. Give specific information about them, including whether		Do not deduct secured claims or exemptions.
✓ No  ☐ Yes. Give specific information about them, including whether you already filed the returns	State: \$	Do not deduct secured claims or exemptions.
✓ No  ☐ Yes. Give specific information about them, including whether	State: \$	Do not deduct secured claims or exemptions.
✓ No  ☐ Yes. Give specific information about them, including whether you already filed the returns	State: \$	Do not deduct secured claims or exemptions.
✓ No  ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years	State: \$ Local: \$	Do not deduct secured claims or exemptions.  9.000 9.000 9.000
<ul> <li>✓ No</li> <li>✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years</li> <li>29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlem</li> </ul>	State: \$ Local: \$	Do not deduct secured claims or exemptions.  9.000 9.000 9.000
<ul> <li>✓ No</li> <li>✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years.</li> <li>29. Family support         Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlem     </li> </ul>	State: \$ Local: \$	Do not deduct secured claims or exemptions.  9.000 9.000 9.000
<ul> <li>✓ No</li> <li>✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years</li> <li>29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlem</li> </ul>	State: \$ Local: \$	Do not deduct secured claims or exemptions.  9.000 9.000 9.000
<ul> <li>✓ No</li> <li>✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years.</li> <li>29. Family support         Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlem     </li> </ul>	State: \$ Local: \$ ent, property settlement	Do not deduct secured claims or exemptions.
<ul> <li>✓ No</li> <li>✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years.</li> <li>29. Family support         Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlem     </li> </ul>	State: \$ Local: \$ ent, property settlement	Do not deduct secured claims or exemptions.  3 0.00  3 0.00  4 0.00
<ul> <li>✓ No</li> <li>✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years.</li> <li>29. Family support         Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlem     </li> </ul>	State: \$ Local: \$ ent, property settlement Alimony: Maintenance:	Do not deduct secured claims or exemptions.  9.0.00 9.0.00 1t \$0.00 \$0.00
<ul> <li>✓ No</li> <li>✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years.</li> <li>29. Family support         Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlem     </li> </ul>	State: \$ Local: \$ ent, property settlement Alimony: Maintenance: Support:	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
<ul> <li>✓ No</li> <li>✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years</li> <li>29. Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlem</li> <li>✓ No</li> <li>✓ Yes. Give specific information</li> </ul>	State: \$  Local: \$  ent, property settlement  Alimony:  Maintenance: Support: Divorce settlement:	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
<ul> <li>✓ No</li> <li>✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years.</li> <li>29. Family support         Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlem     </li> </ul>	State: \$ Local: \$ ent, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
<ul> <li>✓ No</li> <li>✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years</li> <li>29. Family support         <ul> <li>Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlem</li> <li>✓ No</li> <li>✓ Yes. Give specific information</li></ul></li></ul>	State: \$ Local: \$ ent, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
<ul> <li>✓ No</li> <li>✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years.</li> <li>29. Family support         Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlem     </li> <li>✓ No</li> <li>✓ Yes. Give specific information.</li> <li>30. Other amounts someone owes you         Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, wor Social Security benefits; unpaid loans you made to someone else     </li> </ul>	State: \$ Local: \$ ent, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ 0.00 \$
<ul> <li>✓ No         Yes. Give specific information about them, including whether you already filed the returns and the tax years     </li> <li>29. Family support         Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlem         No         Yes. Give specific information     </li> <li>30. Other amounts someone owes you         Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, wor Social Security benefits; unpaid loans you made to someone else     </li> </ul>	State: \$ Local: \$ ent, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00

31. Interests in insurance policies  Examples: Health, disability, or life insurance  No	ce; health savings account (HSA); credit, ho	meowner's, or renter's insurance	
Yes. Name the insurance company	Company name:	Beneficiary:	Surrender or refund value:
of each policy and list its value			\$
			\$
			\$
32. Any interest in property that is due you if you are the beneficiary of a living trust, exproperty because someone has died.  ☑ No ☐ Yes. Give specific information		or are currently entitled to receive	<sub>\$</sub> 0.00
33. Claims against third parties, whether or Examples: Accidents, employment disputes  No		emand for payment	
Yes. Describe each claim			\$ <u>0.00</u>
34. Other contingent and unliquidated claim to set off claims	s of every nature, including counterclain	ns of the debtor and rights	_'
Yes. Describe each claim			<u>\$</u> 0.00
35. Any financial assets you did not already	list		_l
✓ No ☐ Yes. Give specific information			\$ <u>0.00</u>
36. Add the dollar value of all of your entries for Part 4. Write that number here		_	\$25.00
Part 5: Describe Any Business-F	Related Property You Own or Ha	ve an Interest In. List any re	eal estate in Part 1.
37. Do you own or have any legal or equitab  No. Go to Part 6.  Yes. Go to line 38.	le interest in any business-related prope	rty?	
			Current value of the portion you own?  Do not deduct secured claims or exemptions.
38. Accounts receivable or commissions yo	u already earned		
☐ No ☐ Yes. Describe			\$
39. Office equipment, furnishings, and supp Examples: Business-related computers, software		elephones, desks, chairs, electronic devices	]
□ No □ Yes. Describe			\$

40. Machinery, fixtures, e	equipment, supplies you use in business, and tools of your trade			
☐ No ☐ Yes. Describe		\$		
41. Inventory  No Yes. Describe		\$		
42. Interests in partnersh	nips or joint ventures			
☐ No ☐ Yes. Describe	Name of entity: % of ownership:%%%	\$ \$ \$		
43. Customer lists, maili	ng lists, or other compilations			
	cribe	\$		
44. Any business-related No Yes. Give specific information		\$		
		\$ \$ \$		
		\$ \$		
	of all of your entries from Part 5, including any entries for pages you have attached number here	<u>\$</u> 0.00		
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.				
46. <b>Do you own or have</b> a  No. Go to Part 7.  Yes. Go to line 47.	any legal or equitable interest in any farm- or commercial fishing-related property?			
		Current value of the portion you own?  Do not deduct secured claims or exemptions.		
47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No				
∐ Yes		\$		

48. Crops—either growing or harvested			
No Yes. Give specific information			\$
49. Farm and fishing equipment, implements, machinery, fixtures,  No Yes	and tools of trade		1
			\$
50. Farm and fishing supplies, chemicals, and feed			
☐ No ☐ Yes			7
			\$
51. Any farm- and commercial fishing-related property you did not	t already list		
Yes. Give specific information			\$
52. Add the dollar value of all of your entries from Part 6, including for Part 6. Write that number here			\$ 0.00
Part 7: Describe All Property You Own or Have a	n Interest in That	You Did Not List Above	
53. Do you have other property of any kind you did not already lis  Examples: Season tickets, country club membership  No	t?		
Yes. Give specific information			
54. Add the dollar value of all of your entries from Part 7. Write that	at number here	→	<u>\$_0.00</u>
Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2		<b></b>	\$ <u>0.00</u>
56. Part 2: Total vehicles, line 5	\$ <u>300.00</u>	_	
57. Part 3: Total personal and household items, line 15	\$ <u>240.00</u>	_	
58. Part 4: Total financial assets, line 36	<sub>\$</sub> 25.00	_	
59. Part 5: Total business-related property, line 45	\$ <u>0.00</u>	_	
60. Part 6: Total farm- and fishing-related property, line 52	\$ <u>0.00</u>	_	
61. Part 7: Total other property not listed, line 54	<b>+</b> \$0.00	_	
62. <b>Total personal property.</b> Add lines 56 through 61	<sub>\$</sub> 565.00	Copy personal property total >	<b>≠</b> \$_565.00
63. Total of all property on Schedule A/B. Add line 55 + line 62			\$_565.00

Fill in this in	formation to ide	entify your case:		
Debtor 1	Rachal Elizabeth	Motich		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court fo	or the: Northern District of Ohio		
Case number (If known)			_	

## ☐ Check if this is an amended filing

# Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt					
<ol> <li>Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.</li> <li>✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)</li> <li>✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)</li> </ol>					
2. For any property you list on Schedule A/B th	at you claim as exempt, fi	ll in the information below.			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from	Amount of the exemption you claim  Check only one box for each exemption	Specific laws that allow exemption		
2003 Mitsubishi Eclipse Brief description: Line from Schedule A/B: 3.1	\$ 300.00	1,000.00 100% of fair market value, up to any applicable statutory limit	2329.66(A)(2)		
Household goods - Miscellaneous household description:  Line from Schedule A/B: 6	d items \$_140.00	140.00 100% of fair market value, up to any applicable statutory limit	2329.66(A)(4)(a)		
Brief Clothing - Miscellaneous wearing apparel description:  Line from Schedule A/B: 11	\$ <u>100.00</u>	\$ 100.00 100% of fair market value, up to any applicable statutory limit	2329.66(A)(4)(a)		
3. Are you claiming a homestead exemption of more than \$170,350?  (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)  I No  Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  No  Yes					

Case number (if known)\_\_\_\_\_

Part 2:

## **Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from	Amount of the exemption you claim Check only one box	Specific laws that allow exemption
	Schedule A/B	for each exemption	
Cash (Cash On Hand) Brief description: Line from Schedule A/B: 16	\$ <u>25.00</u>	\$ 25.00 100% of fair market value, up to any applicable statutory limit	2329.66(A)(3)
Brief description:  Line from Schedule A/B:	\$	\$100% of fair market value, up to any applicable statutory limit	)
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	0
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up tany applicable statutory limit	0
Brief description: Line from	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Schedule A/B: Brief description:	\$	\$ 100% of fair market value, up t any applicable statutory limit	0
Line from Schedule A/B: Brief description: Line from	\$	\$ 100% of fair market value, up t any applicable statutory limit	0
Schedule A/B: Brief description: Line from	\$	\$ 100% of fair market value, up to any applicable statutory limit	0
Schedule A/B: Brief description: Line from Schedule A/B:	\$	\$100% of fair market value, up to any applicable statutory limit	
Brief description: Line from	\$	\$100% of fair market value, up to	0
Schedule A/B: Brief description: Line from	\$	any applicable statutory limit  \$ 100% of fair market value, up to any applicable statutory limit	)
Schedule A/B: Brief description: Line from Schedule A/B:	\$	\$100% of fair market value, up to any applicable statutory limit	

Fill in this in	formation to identify yo	ur case:					
Debtor 1	Rachal Elizabeth Motich						
Dahtan	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States	Bankruptcy Court for the: No	rthern District of C	Dhio				
	, ,		•				
Case number (If known)							if this is an
						amend	ed filing
Official	Form 106D						
Official	Form 106D						
Sched	lule D: Credi	tors Wh	no Have Clai	ms Secure	ed by Prop	perty	12/15
Be as comp	lete and accurate as pos	ssible. If two m	arried people are filing t	together, both are eq	ually responsible f	or supplying correc	et
information.	. If more space is neede ages, write your name a	d, copy the Ad	ditional Page, fill it out,	number the entries,	and attach it to this	form. On the top of	fany
additional p	ages, write your name a	na case numb	er (II known).				
1. Do any cr	editors have claims sec	ured by your p	property?				
✓ No. Ch	neck this box and submit t	his form to the	court with your other sche	dules. You have nothi	ng else to report on	this form.	
Yes. F	ill in all of the information	below.					
Part 1: Li	st All Secured Claims	S					
2. List all se	cured claims. If a credito	r has more thar	n one secured claim, list th	e creditor separately	Column A	Column B	Column C
for each cl	laim. If more than one cre	editor has a par	ticular claim, list the other	creditors in Part 2.	Amount of claim  Do not deduct the	Value of collateral that supports this	Unsecured portion
As much a	as possible, list the claims	in alphabetical	order according to the cre	editor's name.	value of collateral.	claim	If any
2.1		Descri	be the property that secui	res the claim:	\$	\$	\$
			по респравој			· ·	. *
Creditor's Na	ime						
Number	Street						
Hamber	Cucci						
			he date you file, the claim	is: Check all that apply.			
-			ntingent				
City	State ZIP ( the debt? Check one.		liquidated :puted				
Debtor 1			•				
Debtor 2		_	of lien. Check all that apply.				
	and Debtor 2 only		agreement you made (such a loan)	is mortgage or secured			
At least of	one of the debtors and anothe	_	atutory lien (such as tax lien, n	nechanic's lien)			
☐ Check i	f this claim relates to a		dgment lien from a lawsuit				
	nity debt		ner (including a right to offset)		_		
2.2	as incurred		digits of account number		•	•	•
		Descri	be the property that secu	res the claim:	\$		.\$
Creditor's Na	nme						
Number	Otract						
Number	Street						
		As of t	he date you file, the claim	is: Check all that apply.			
		🗆 co	ntingent				
City	State ZIP (	= 01	liquidated				
_	the debt? Check one.	<b>∟</b> Dis					
Debtor 1 Debtor 2	•	Nature	of lien. Check all that apply.				
	and Debtor 2 only		agreement you made (such a	s mortgage or secured			
_	one of the debtors and anothe		· loan) atutory lien (such as tax lien, n	nechanic's lien)			
Check in	f this claim relates to a		dgment lien from a lawsuit	- /			
commu	nity debt		ner (including a right to offset)		_		
	as incurred		digits of account number		L 0 00	1	
Add the	dollar value of your ontr	ice in Column	A on this name Write th	at number here	\$ 0.00	Ī	

Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property
19-50984-amk Doc 1 FILED 04/30/19 ENTERED 04/30/19 15:26:04 Page

page 1 of <u>1</u> Page 22 of 62

$D_{\alpha}$	htor	1	

Rachal Elizabeth Motich
First Name Middle Name Last Name

Case number (if known)\_\_\_\_\_

Part 2:	List Others to Be Notified for a Debt That You Alrea	dv Listed
rait Z.	List Others to be Nothieu for a best finat fou Allea	uy Listet

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

notined for any desice in fact if do not im or			
			On which line in Part 1 did you enter the creditor?
Name			Last 4 digits of account number
Ivanic			
Street			
City	Ctata	7ID Code	
City	State	ZIP Code	On which line in Part 1 did you enter the avaditor?
			On which line in Part 1 did you enter the creditor?
Name		<del></del>	Last 4 digits of account number
Street			
City	State	ZIP Code	
			On which line in Part 1 did you enter the creditor?
 Name			Last 4 digits of account number
Name			
Street			
Gueet			
		<del></del>	
01	01-1-	710.0	
City	State	ZIP Code	On which line in Port 4 did you enter the avaditor?
			On which line in Part 1 did you enter the creditor?
Name		<del></del>	Last 4 digits of account number
Street			
City	State	ZIP Code	
			On which line in Part 1 did you enter the creditor?
Namo			Last 4 digits of account number
Name			
Street			
•			
City	State	ZIP Code	
- Chy	Glate	ZII GOUG	On which line in Part 1 did you enter the creditor?
Name			Last 4 digits of account number
Street			
City	State	ZIP Code	

Fil	I in this information to identify your case:					
Del	Bachal Elizabeth Motich					
	First Name Middle Name	Last Name				
	ouse, if filing) First Name Middle Name	Last Name				
Uni	ited States Bankruptcy Court for the: Northern District of	Ohio				
	se numberknown)	· ·				t if this is an ded filing
	NOWI)					J
Of	ficial Form 106E/F					
Sc	chedule E/F: Creditors W	/ho Have Unsecu	red Claim	S		12/15
List A/B: cred need any	as complete and accurate as possible. Use Part the other party to any executory contracts or use Property (Official Form 106A/B) and on Sched ditors with partially secured claims that are listeded, copy the Part you need, fill it out, number additional pages, write your name and case nute to List All of Your PRIORITY Unsecured.	nexpired leases that could result fule G: Executory Contracts and U ed in Schedule D: Creditors Who I the entries in the boxes on the left mber (if known).	in a claim. Also lis nexpired Leases (C lave Claims Secure	t executory co Official Form 10 ed by Property.	ntracts on <i>Sc</i> 16G). Do not ir . If more space	<i>hedule</i> nclude any e is
	Do any creditors have priority unsecured claims	s against you?				
	☑ No. Go to Part 2. ☑ Yes.					
2. l	List all of your priority unsecured claims. If a creach claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the cunsecured claims, fill out the Continuation Page of	a claim has both priority and nonprior claims in alphabetical order accordin Part 1. If more than one creditor hole	ority amounts, list that g to the creditor's na ds a particular claim,	at claim here an ame. If you have	d show both pre more than two	iority and priority
(	(For an explanation of each type of claim, see the i	nstructions for this form in the instru	ction bookiet.)	Total claim	Priority amount	Nonpriority amount
2.1		Last 4 digits of account number		\$	\$	\$
,	Priority Creditor's Name	When was the debt incurred?		*	T	·
	Number Street	when was the dept incurred:	<del></del>			
		As of the date you file, the claim i	s: Check all that apply.			
	City State ZIP Code	☐ Contingent☐ Unliquidated				
	Who incurred the debt? Check one.	Disputed				
	☐ Debtor 1 only ☐ Debtor 2 only	Type of PRIORITY unsecured c	aim:			
	Debtor 1 and Debtor 2 only	<ul><li>☐ Domestic support obligations</li><li>☐ Taxes and certain other debts you</li></ul>	owe the government			
	At least one of the debtors and another	Claims for death or personal injury	=			
	☐ Check if this claim is for a community debt	intoxicated				
	Is the claim subject to offset?	U Other. Specify				
	□ No □ Yes					
2.2	165	Last 4 digits of account number		\$	\$	\$
	Priority Creditor's Name	When was the debt incurred?	<del> </del>	<u> </u>	· •	<u> </u>
	Number Street	As of the date you file, the claim i	s: Check all that apply.			
		Contingent				
	City State ZIP Code	☐ Unliquidated☐ Disputed				
	Who incurred the debt? Check one.	•	laim.			
	☐ Debtor 1 only ☐ Debtor 2 only	Type of PRIORITY unsecured c  Domestic support obligations	aiill.			
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you	owe the government			
	At least one of the debtors and another	☐ Claims for death or personal injury	· ·			
	☐ Check if this claim is for a community debt	intoxicated				
	Is the claim subject to offset?	U Other. Specify				
	Yes					

Del	ht∩r	1

Rachal Elizabeth Motich

First Name Middle Name Case number (if known)\_

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### List All of Your NONPRIORITY Unsecured Claims

Last Name

	Do any creditors have nonpriority unsecured  No. You have nothing to report in this part. So  Yes				
	List all of your nonpriority unsecured claims in nonpriority unsecured claim, list the creditor sepaincluded in Part 1. If more than one creditor holds claims fill out the Continuation Page of Part 2.	rately for each claim	n. For each claim listed, identify wh	at type of claim it is. Do not	list claims already
	Ability Recovery Services				Total claim
4.1			Last 4 digits of account number	D58258****	
	Nonpriority Creditor's Name		•		\$ <u>1,823.00</u>
	PO Box 4031		When was the debt incurred?	7/7/2018	
	Number Street				
			As of the date you file, the claim	is: Check all that apply.	
	Wyoming PA	18644	☐ Contingent		
	City State	ZIP Code	Unliquidated		
	Who incurred the debt? Check one.		Disputed		
	☑ Debtor 1 only ☐ Debtor 2 only		Type of NONPRIORITY unsecu	ıred claim:	
	Debtor 1 and Debtor 2 only		Student loans		
	At least one of the debtors and another		Obligations arising out of a separathat you did not report as priority		
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing		
	Is the claim subject to offset?		Other. Specify Collection Ager	ncy	
	No				
	Yes				
4.2	Allstate		Last 4 digits of account number	17cv01347	\$ <u>4,310.97</u>
	Nonpriority Creditor's Name		When was the debt incurred?		
	PO Box 21169				
	Number Street		As of the date you file, the claim	is: Check all that apply.	
	Paralia	04040	☐ Contingent		
	Roanoke VA City State	24018 ZIP Code	Unliquidated		
	Who incurred the debt? Check one.  Debtor 1 only		☐ Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecu	ıred claim:	
	Debtor 1 and Debtor 2 only		Student loans  Obligations arising out of a separ	ration agracment or diverse	
	At least one of the debtors and another		that you did not report as priority	claims	
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing	g plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify		
	<b>✓</b> No				
	Yes Enhanced Recovery Company				
4.3	, , ,		Last 4 digits of account number	19818****	<sub>\$</sub> 283.00
	Nonpriority Creditor's Name		When was the debt incurred?	8/23/2018	
	PO Box 57547				
	Number Street		As of the date you file, the claim	is: Check all that apply.	
	Jacksonville FL	32241	☐ Contingent		
	City State Who incurred the debt? Check one.	ZIP Code	Unliquidated		
	Debtor 1 only		Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecu	ured claim:	
	Debtor 1 and Debtor 2 only		Student loans		
	At least one of the debtors and another		Obligations arising out of a separathat you did not report as priority		
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing	g plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify Collection Ager	псу	
	<b>✓</b> No				
	Yes				

1

Rachal Elizabeth Motich

irst Name	Middle Na

ase num	hor /:	(mounn)		

List All of Your NONPRIORITY Unsecured Claims

Last Name

3.	Do any creditors have nonpriority unsecured cl No. You have nothing to report in this part. Sub Yes	= -			
4.	List all of your nonpriority unsecured claims in nonpriority unsecured claim, list the creditor separa included in Part 1. If more than one creditor holds a claims fill out the Continuation Page of Part 2.	ately for each claim	. For each claim listed, identify wha	at type of claim it is. Do not	list claims already
					Total claim
4.4	First Federal Credit Control		Last 4 digits of account number	1828****	<sub>\$</sub> 370.00
	Nonpriority Creditor's Name 2470 Chagrin Blvd 205		When was the debt incurred?	10/1/2015	\$ <u>070.00</u>
	Number Street	<del></del>			
	Cleveland OH	44112	As of the date you file, the claim	is: Check all that apply.	
	City State	ZIP Code	Contingent		
	Who incurred the debt? Check one.		Unliquidated		
	Debtor 1 only		Disputed	and alabase	
	Debtor 2 only		Type of NONPRIORITY unsecu	red claim:	
	Debtor 1 and Debtor 2 only		Obligations arising out of a separa	ation agreement or divorce	
	At least one of the debtors and another		that you did not report as priority	claims	
	☐ Check if this claim is for a community debt		<ul><li>□ Debts to pension or profit-sharing</li><li>☑ Other. Specify Collection Ager</li></ul>		
	Is the claim subject to offset?		Other. Specify Concentrativity of	,	
	<b>☑</b> No				
4.5	☐ Yes Huntington Bank				100.00
4.5	Trumgion bank		Last 4 digits of account number		\$ 100.00
	Nonpriority Creditor's Name		When was the debt incurred?		
	17 S High St  Number Street				
	Number Street		As of the date you file, the claim	is: Check all that apply.	
	Columbus OH	43218	☐ Contingent		
	City State	ZIP Code	Unliquidated		
	Who incurred the debt? Check one.  Debtor 1 only		☐ Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecu	red claim:	
	Debtor 1 and Debtor 2 only		<ul><li>Student loans</li><li>Obligations arising out of a separa</li></ul>	ation careement or diverse	
	At least one of the debtors and another		that you did not report as priority		
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing		
	Is the claim subject to offset?		Other. Specify Overdrawn Ban	ik Account	
	✓ No				
	Yes				
4.6	Keis George		Last 4 digits of account number	1552	\$17,000.00
	Nonpriority Creditor's Name		When was the debt incurred?	7/19/2017	Ψ
	55 Public Square Ste 800				
	Number Street		As of the date you file, the claim	is: Check all that apply	
	Cleveland OH	44113	<u> </u>		
	City State	ZIP Code	☐ Contingent ☐ Unliquidated		
	Who incurred the debt? Check one.  Debtor 1 only		Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecu	red claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans		
	At least one of the debtors and another		Obligations arising out of a separa		
	☐ Check if this claim is for a community debt		that you did not report as priority of Debts to pension or profit-sharing		
	Is the claim subject to offset?		Other. Specify Subrogation - u	ininsured motor vehicle acc	ident
	No				
	Yes				

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Rachal Elizabeth Motich

_			
	Middle	Name	

Last Name		

Case number	(if known)		

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### List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority unsecured  ☐ No. You have nothing to report in this part. S  ✓ Yes	•	•	
4.	nonpriority unsecured claim, list the creditor sepa	arately for each c	cal order of the creditor who holds each claim. If a creditor has laim. For each claim listed, identify what type of claim it is. Do not m, list the other creditors in Part 3.If you have more than three no	list claims already
	_			Total claim
4.7	Key Bank		Last 4 digits of account number	
	Nonpriority Creditor's Name		Last 4 digits of account number	\$_100.00
	127 Public Square		When was the debt incurred?	
	Number Street		<del></del>	
			As of the date you file, the claim is: Check all that apply	
	Cleveland OH	44114	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent	
	Who incurred the debt? Check one.		Unliquidated	
	Debtor 1 only		Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:  ☐ Student loans	
	☐ Debtor 1 and Debtor 2 only		☐ Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another		that you did not report as priority claims	
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify Overdrawn Bank Account	
	No			
	Yes			
4.8	Ohio BMV		Last 4 digits of account number 2106	\$ 170.00
	Name is site. One distants Name		— When was the debt incurred?	-
	Nonpriority Creditor's Name Attn: Compliance Unit		<del></del>	
	Number Street		<del>_</del>	
	P.O. Box 16583		As of the date you file, the claim is: Check all that apply.	
	Columbus OH	43216	Contingent	
	City State	ZIP Code	Unliquidated	
	Who incurred the debt? Check one.  Debtor 1 only		☐ Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	☐ At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	•		Other Specify Reinstatement fees	
	Is the claim subject to offset?			
	Yes			
			Last 4 digits of account number	
			•	\$
	Nonpriority Creditor's Name		When was the debt incurred?	
	Number Street		<u> </u>	
			As of the date you file, the claim is: Check all that apply.	
			☐ Contingent	
	City State Who incurred the debt? Check one.	ZIP Code	☐ Unliquidated	
	Debtor 1 only		Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another		☐ Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt		that you did not report as priority claims	
	•		☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
	Is the claim subject to offset?		Guier. Opeony	
	Yes			

Debtor 1

Rachal Elizabeth Motich

First Name

Middle Name

Last Name

Case number (if known)	

### Part 3:

## List Others to Be Notified About a Debt That You Already Listed

Allstate Insurance Company			On which entry in Part 1 or Part 2 did you list the original creditor?		
Name			Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims		
P.O. Box 218					
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims		
Camby	IN	46113-02	Last 4 digits of account number		
Sity	State	ZIP Code			
Angela Fanizzi			On which entry in Part 1 or Part 2 did you list the original creditor?		
3898 Sprucehaven Street, NW			Line 4.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
lumber Street			✓ Part 2: Creditors with Nonpriority Unsecured		
			Claims		
Uniontown Sity	OH State	44685 ZIP Code	Last 4 digits of account number		
·		2.11 00000			
Emergency Services of Central	Unio ————————————————————————————————————		On which entry in Part 1 or Part 2 did you list the original creditor?		
iame 155 5TH ST NE			Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims		
lumber Street			Part 2: Creditors with Nonpriority Unsecured		
			Claims		
Barberton	ОН	44203	Last 4 digits of account number		
ity	State	ZIP Code	•		
Jack Morrison			On which entry in Part 1 or Part 2 did you list the original creditor?		
<sub>lame</sub> One Cascade Plaza Suite 1510			Line 4.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
lumber Street			✓ Part 2: Creditors with Nonpriority Unsecured		
			Claims		
Akron	ОН	44308	Last 4 digits of account number		
City	State	ZIP Code	Last 4 digits of account number		
Keis George			On which entry in Part 1 or Part 2 did you list the original creditor?		
lame			12		
55 Public Sq 800			Line 4.2 of ( <i>Check one</i> ): Part 1: Creditors with Priority Unsecured Claims		
lumber Street			✓ Part 2: Creditors with Nonpriority Unsecured Claims		
 Cleveland	OH	44113			
City	State	ZIP Code	Last 4 digits of account number		
Sprint			On which entry in Part 1 or Part 2 did you list the original creditor?		
lame					
6200 Sprint Pkwy			Line $4.3$ of ( <i>Check one</i> ): $\square$ Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims		
Shawnee Mission	KS	66251	Last 4 digits of account number		
City	State	ZIP Code	Last 7 digits of account number		
Summa Emergency Associates	Inc		On which entry in Part 1 or Part 2 did you list the original creditor?		
<sub>lame</sub> 3730 Tobs Dr					
			Line $4.4$ of ( <i>Check one</i> ): $\square$ Part 1: Creditors with Priority Unsecured Claims		
Number Street			✓ Part 2: Creditors with Nonpriority Unsecured Claims		
Uniontown	OH	44685	Giailtie		
JINOI ROWII	O11	<del>11</del> 000	Last 4 digits of account number		

First Name Middle Name Case number (if known)\_

Part 4:

#### Add the Amounts for Each Type of Unsecured Claim

Last Name

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. <b>Total.</b> Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	<ol><li>Other. Add all other nonpriority unsecured claims. Write that amount here.</li></ol>	6i.	+ \$	24,156.97
	6j. <b>Total.</b> Add lines 6f through 6i.	6j.		24,156.97

Fill in this information to identify your case:						
Debtor	Rachal Elizabeth Motich					
200101	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse If filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the Northern District of Ohio						
Case number (If known)			_	(2007)		

Check if this is an amended filing

# Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom	you have th	ne contract or lease	State what the contract or lease is for
2.1				
	Name			
	Street			
	City Sta	ate ZIP Co	ode	•
2.2				
	Name			
	Street			
	City Sta	ate ZIP Co	ode	
2.3				
	Name			
	Street			
	City Sta	ate ZIP Co	ode	
2.4				
	Name			
	Street			
	City Sta	ate ZIP Co	ode	-
2.5				
	Name			
	Street			
	City Sta	ate ZIP Co	ode	

Fill in th	is information to identify ye	our case:			
Debtor 1	Rachal Elizabeth Motich				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if	filing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the: No	orthern District of Ohio			
Case num	ber			,	_
(If known)					Check if this is an amended filing
Officia	J Compo 40011				difference filling
	dule H: Your	Cadabtar			12/15
are filing to and number case num  1. Do you will have a constant of the const	together, both are equally in the entries in the boxes ber (if known). Answer even have any codebtors? (If to estimate a second of the last 8 years, have young, California, Idaho, Louisia to. Go to line 3.	responsible for suppon the left. Attach to the left of	blying correct infor he Additional Page sase, do not list eithe sity property state of exico, Puerto Rico, To valent live with you	mation. If more to this page. Of the response as a contract territory? (Coffexas, Washington at the time?	mmunity property states and territories include
	Name of your spouse, former spo	ouse, or legal equivalent			
	Number Street				
	City	State	Z	IP Code	
show Sche Sche	n in line 2 again as a code	btor only if that pers ), <i>Schedule E/F</i> (Off	son is a guarantor	or cosigner. Ma	our spouse is filing with you. List the person like sure you have listed the creditor on (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:
3.1					Schedule D, line
Nar	ne				Schedule E/F, line
Stre	eet				Schedule G, line
City	,	State		ZIP Code	
3.2					
Nar	ne				Schedule D, line
Str	eet				Schedule E/F, line
City	,	State		ZIP Code	
3.3		State		0000	
Nar	ne			<del> </del>	Schedule D, line
Stre	eet				Schedule E/F, line

Official Form 106H Schedule H: Your Codebtors 19-50984-amk Doc 1 FILED 04/30/19 ENTERED 04/30/19 15:26:04 Page 31 of 62

ZIP Code

Fill in this information to identify	your case:					
Rachal Elizabeth	n Motich					
Debtor 1 First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:	Northern District of Ohio					
Case number		,		Check if this	is:	
(II KIIOWII)				An amen	•	
					ment showing postpus of the following date	
Official Form 106I				MM / DD /		
Schedule I: You	ır Income					12/15
Be as complete and accurate as posupplying correct information. If you are separated and your spouseparate sheet to this form. On the  Part 1: Describe Employm	ou are married and not filing is a second in the second in	ng jointly, and yo	ur spouse is li ormation abou	ving with you it your spouse	, include information e. If more space is no	about your spouse. eeded, attach a
Fill in your employment		Debtor 1			Debtor 2 or non-fil	ing enouse
information.  If you have more than one job,		Deptor 1			Deptor 2 of Hori-III	ing spouse
attach a separate page with information about additional employers.	Employment status	Employed  Not employe	ed		Employed Not employed	
Include part-time, seasonal, or self-employed work.						
Occupation may include student or homemaker, if it applies.	Occupation			· · · · · · · · · · · · · · · · · · ·		
	Employer's name			<del></del>		
	Employer's address					
		Number Street			Number Street	
		City	State ZIP Co	nde -	City	State ZIP Code
	How long employed the	•	Oldic Zii O	540	Oity	otate Zii oode
Part 2: Give Details About	Monthly Income					
Estimate monthly income as of spouse unless you are separated.  If you or your non-filing spouse ha	•	-				
below. If you need more space, at				. , . ,		
			For [	Debtor 1	For Debtor 2 or non-filing spouse	
<ol><li>List monthly gross wages, sala deductions). If not paid monthly,</li></ol>			2. \$		\$	
3. Estimate and list monthly over	time pay.		3. +\$	·	+ \$	
4. Calculate gross income. Add lin	ne 2 + line 3.		4. \$		\$	

Official Form 106l Schedule I: Your Income page 1

irst Name Middle Name

Last Name

Case number (if known)

			For	Debtor 1	_	For Debtor 2 or ion-filing spous	ie		
Copy line 4 here		<b>→</b> 4.	\$			\$			
5. List all payroll deductions	:								
5a. Tax, Medicare, and S	ocial Security deductions	5a.	\$			\$			
5b. Mandatory contributi	ions for retirement plans	5b.	\$			\$			
5c. Voluntary contribution	ons for retirement plans	5c.	\$			\$			
5d. Required repayments	s of retirement fund loans	5d.	\$			\$			
5e. Insurance		5e.	\$			\$			
5f. Domestic support ob	oligations	5f.	\$			\$			
5g. Union dues		5g.	\$			\$			
5h. Other deductions. Sp	pecify:	5h.	+\$		+	\$			
<u></u>		-	\$			\$			
		-	\$			\$	_		
		-	\$			\$	_		
6. Add the payroll deductio	<b>ns</b> . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	. 6.	\$			\$	_		
7. Calculate total monthly to	ake-home pay. Subtract line 6 from line 4.	7.	\$			\$	_		
8. List all other income regu									
profession, or farm	tal property and from operating a business,								
	each property and business showing gross necessary business expenses, and the total	8a.	\$	0.00		\$			
8b. Interest and dividend	ds	8b.	\$	0.00		\$			
8c. Family support paym regularly receive	nents that you, a non-filing spouse, or a depend	dent							
Include alimony, spous settlement, and proper	sal support, child support, maintenance, divorce rty settlement.	8c.	\$	0.00		\$			
8d. Unemployment comp	pensation	8d.	\$	0.00		\$			
8e. Social Security		8e.	\$	250.00		\$			
Include cash assistand that you receive, such	esistance that you regularly receive the eand the value (if known) of any non-cash assists as food stamps (benefits under the Supplemental rogram) or housing subsidies.	ance 8f.	\$	520.00		\$			
8g. Pension or retiremen	nt income	- 8g.	¢	0.00		¢			
-			Ψ	0.00		Ψ			
8h. Other monthly incom	•	_ 8h.	+ \$		, -	+ \$	_		
9. Add all other income. Ad	d lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	770.00		\$	_		
10. Calculate monthly income Add the entries in line 10 for	e. Add line 7 + line 9. or Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	770.00	+	\$	=	\$	770.00
Include contributions from a friends or relatives.	ntributions to the expenses that you list in <i>Sch</i> an unmarried partner, members of your household	, your d	lepende						
Do not include any amounts Specify:	s already included in lines 2-10 or amounts that ar	e not a	vailable	to pay expe	nses I	isted in <i>Schedul</i>	le J. 11. <b>+</b>	\$	0.00
	st column of line 10 to the amount in line 11. The	ne roou	It is the	combined m	onthis	rincomo			
	rummary of Your Assets and Liabilities and Certain				-		12.		770.00 bined
13. <b>Do you expect an increas</b> ✓ No.  ✓ Yes. Explain:	se or decrease within the year after you file this	s form?	•					mont	hly income

Official Form 106l Schedule I: Your Income page 2

Fill in this information to ide	ntify your case:			
Debtor 1 Rachal Elizabeth N	Motich			
First Name	Middle Name Last Name	Check if this is:		
Debtor 2 (Spouse, if filing) First Name	Middle Name Last Name	An amende		
United States Bankruptcy Court for	the. Northern District of Ohio			petition chapter 13
	uic.	(State) expenses as	s of the following	g date:
Case number (If known)		MM / DD / YY	ΥY	
Official Form 106J				
Schedule J: \	our Expenses			12/15
-	as possible. If two married people are fineeded, attach another sheet to this for stion.			-
Part 1: Describe Your	Household			
1. Is this a joint case?				
No. Go to line 2.  Yes. Does Debtor 2 live in the line	in a separate household?  ust file Official Form 106J-2, Expenses for	Separate Household of Debtor 2.		
2. Do you have dependents?	□ No			
Do not list Debtor 1 and	Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Debtor 2.  Do not state the dependents'	each dependent	Ayra Mae Faith Whitcher	1	No Yes
names.		Brenden Gregory Motich	4	☐ No
			<del></del>	✓Yes
				No
				Yes
		<del></del>		No
				Yes
				No Yes
De verm ermenere in elude				103
Do your expenses include expenses of people other th				
yourself and your depender	nts? • res			
Part 2: Estimate Your 0	ngoing Monthly Expenses			
	your bankruptcy filing date unless you e bankruptcy is filed. If this is a suppler			
	n non-cash government assistance if yo	ou know the value of		
	luded it on Schedule I: Your Income (Of		Your expe	enses
4. The rental or home owners any rent for the ground or lot	<b>chip expenses for your residence.</b> Include t.	de first mortgage payments and	\$	0.00
If not included in line 4:				0.00
4a. Real estate taxes		4	a. \$	0.00
4b. Property, homeowner's	s, or renter's insurance	4	b. \$	0.00
4c. Home maintenance, re	pair, and upkeep expenses	4	c. \$	0.00
4d. Homeowner's associat	ion or condominium dues	4		0.00

Official Form 106J Schedule J: Your Expenses page 1

4d. Homeowner's association or condominium dues

Debtor 1

irst Name Middle Name

Last Name

Case number (if known)\_\_\_\_\_

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$0.00_
	6b. Water, sewer, garbage collection	6b.	\$0.00_
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$0.00_
	6d. Other. Specify:	6d.	\$0.00_
7.	Food and housekeeping supplies	7.	\$600.00
8.	Childcare and children's education costs	8.	\$0.00_
9.	Clothing, laundry, and dry cleaning	9.	\$100.00_
10.	Personal care products and services	10.	\$50.00_
11.	Medical and dental expenses	11.	\$0.00_
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$0.00_
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00_
14.	Charitable contributions and religious donations	14.	\$0.00_
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$0.00_
	15b. Health insurance	15b.	\$0.00_
	15c. Vehicle insurance	15c.	\$0.00_
	15d. Other insurance. Specify:	15d.	\$0.00_
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$0.00
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$0.00_
	17b. Car payments for Vehicle 2	17b.	\$0.00
	17c. Other. Specify:	17c.	\$0.00_
	17d. Other. Specify:	17d.	\$0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$0.00
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ıe.	
	20a. Mortgages on other property	20a.	\$0.00
	20b. Real estate taxes	20b.	\$0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
	20e. Homeowner's association or condominium dues	20e.	\$0.00

Official Form 106J

Debtor 1	Rachal Eli	izabeth Motich		Case number (if known)
	First Name	Middle Name	Last Name	

21. <b>Oth</b>	er. Specify:	21.	+\$	0.00
			+\$	
			+\$	
2. Cal	culate your monthly expenses.			
22a	Add lines 4 through 21.	22a.	\$	750.00
22b	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a	22b.	\$	
and	22b. The result is your monthly expenses.	22c.	\$	750.00
	late your monthly net income.		\$	770.00
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	Ψ	750.00
23b.	Copy your monthly expenses from line 22c above.	23b.	<b>-</b> \$	750.00
23c.	Subtract your monthly expenses from your monthly income.		\$	20.00
	The result is your monthly net income.	23c.	Ψ	
4 Do v	ou expect an increase or decrease in your expenses within the year after you file this form?			
•				
	kample, do you expect to finish paying for your car loan within the year or do you expect your age payment to increase or decrease because of a modification to the terms of your mortgage?			
<b>V</b> N				
	S. Evnlain here			

Fill in this information to identify your case:					
Debtor 1	Rachal Eliza	abeth Motich Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court	for the Northern District of Ohio			
Case number (If known)					

☐ Check if this is an amended filing

#### Official Form 106Dec

#### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
	read the summary and schedules filed with this declaration and
	read the summary and schedules filed with this declaration and
der penalty of perjury, I declare that I have t they are true and correct.	read the summary and schedules filed with this declaration and
t they are true and correct.	
	read the summary and schedules filed with this declaration and

Fill in this information to identify your case:					
Debtor 1	Rachal Elizabeth	Motich			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E Case number (If known)	Bankruptcy Court for	the: Northern District of Ohio			

Check if this is an amended filing

#### Official Form 107

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	t is your current marital status?  Married  Not married			
V 1	ng the last 3 years, have you lived anywhere No Yes. List all of the places you lived in the last 3 y			
	Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
	Number Street	From To	Same as Debtor 1  Number Street	Same as Debtor 1  From  To
	City State ZIP Code	-	City State ZIP Code	
	Number Street	From To	Same as Debtor 1  Number Street	Same as Debtor 1  From  To
o \A/;4h	City State ZIP Code		City State ZIP Code	
and I	territories include Arizona, California, Idaho, Lo	uisiana, Nevada, Nev	valent in a community property state or territory? ( <i>C</i> w Mexico, Puerto Rico, Texas, Washington, and Wiscon 106H).	ommunity property states nsin.)

Official Form 107

rat Nama Middle No.

Case nu	mber (if kno
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D	9

#### Explain the Sources of Your Income

If you are filing a joint case	-	-	ive togeth	esses, including part-tile er, list it only once unde		
<ul><li>□ No</li><li>☑ Yes. Fill in the details.</li></ul>						
		Debtor 1			Debtor 2	
		Sources of incor Check all that app		Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of cu the date you filed for	•	Wages, components, tips  Operating a	S	\$ 0.00	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$
For last calendar yea		Wages, comi	S	\$ <u>0.00</u>	Wages, commissions, bonuses, tips	\$
(January 1 to Decemb	er 31, <u>2018</u> ) YYYY	Operating a	business		Operating a business	
For the calendar year		Wages, components, tips  Operating a light	S	\$ 0.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$
` ,	YYYY				<u> </u>	
Did you receive any other Include income regardless and other public benefit pay winnings. If you are filing a List each source and the graph No	of whether that inc yments; pensions; joint case and you	ome is taxable. E rental income; into have income that	examples of terest; divi	of other income are alindends; money collected ived together, list it online the collected ived together.	d from lawsuits; royalties; ar y once under Debtor 1.	
Include income regardless and other public benefit pay winnings. If you are filing a List each source and the gr	of whether that inc yments; pensions; joint case and you ross income from e	ome is taxable. E rental income; into have income that each source separ	examples of terest; divi	of other income are alindends; money collected ived together, list it online the collected ived together.	d from lawsuits; royalties; ar y once under Debtor 1.	
Include income regardless and other public benefit pay winnings. If you are filing a List each source and the grant No	of whether that inc yments; pensions; joint case and you ross income from e	ome is taxable. E rental income; into have income that each source separates of income	examples of the terest; dividence of the terest; dividence of the terest	of other income are alindends; money collected ived together, list it only not include income that the come from tree eductions and	d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4.	Gross income from each source
Include income regardless and other public benefit pay winnings. If you are filing a List each source and the graph No Yes. Fill in the details.	of whether that inc yments; pensions; joint case and you ross income from e	ome is taxable. E rental income; into have income that each source separate of the source s	Examples of the terest; divident to the terest; divident to the terest t	of other income are alindends; money collected ived together, list it only not include income that come from the eductions and so	d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions and
Include income regardless and other public benefit pay winnings. If you are filing a List each source and the graph No Yes. Fill in the details.	of whether that inc yments; pensions; joint case and you ross income from e Debtor Sources Describe	ome is taxable. E rental income; into have income that each source separate of the source s	camples of terest; dividence of the control of the	of other income are alindends; money collected ived together, list it only not include income that come from the eductions and so	d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions and exclusions)
Include income regardless and other public benefit pay winnings. If you are filing a List each source and the graph No Yes. Fill in the details.	of whether that incomments; pensions; joint case and you ross income from e  Debtor  Sources  Describe	ome is taxable. E rental income; into have income that each source separate of the source s	Gross interact source description of the sou	of other income are alindends; money collected ived together, list it only not include income that come from the eductions and solutions.	d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions and exclusions)
Include income regardless and other public benefit pay winnings. If you are filing a List each source and the graph No Yes. Fill in the details.  The January 1 of current ar until the date you d for bankruptcy:	of whether that incomments; pensions; joint case and you ross income from e  Debtor Sources Describe  Social Security WIC Food stamps	ome is taxable. E rental income; into have income that have income that each source separate of income e below.	Gross ine each sou (before de exclusion: \$1,000.0	of other income are alindends; money collected ived together, list it only not include income that come from tree eductions and solutions.	d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions and exclusions)
Include income regardless and other public benefit pay winnings. If you are filing a List each source and the graph No Yes. Fill in the details.  The property of current ar until the date you d for bankruptcy:	of whether that incomments; pensions; joint case and you ross income from e  Debtor Sources Describe  Social Security WIC Food stamps	ome is taxable. E rental income; into have income that have income that each source separate of income e below.	Gross interact source (before de exclusion: \$1,000.0 \$680.00 \$1,400.0	of other income are alindends; money collected ived together, list it only not include income that come from tree eductions and solutions are solutions and solutions and solutions are solutions are solutions.	d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions and exclusions)
Include income regardless and other public benefit pay winnings. If you are filing a List each source and the graph No      Yes. Fill in the details.  The property of the pro	of whether that incomments; pensions; joint case and you ross income from each of the sources of the social Security wilc food stamps  Social Security  Social Security  Social Security  Social Security  Social Security  Social Security	ome is taxable. E rental income; into have income that have income that each source separate source separate below.	Gross ine each sou (before de exclusion: \$1,000.0 \$680.00 \$1,400.0	of other income are alindends; money collected ived together, list it only not include income that come from tree eductions and solutions are solutions and solutions and solutions and solutions are solutions and solutions and solutions are solutions and solutions and solutions are solutions are solutions.	d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions and exclusions)  \$
Include income regardless and other public benefit pay winnings. If you are filing a List each source and the graph No Yes. Fill in the details.  The summary 1 of current ar until the date you defor bankruptcy:  Last calendar year:  The summary 1 to seember 31, 2018	of whether that incomments; pensions; joint case and you ross income from each of the sources of the social Security wild social Securi	ome is taxable. E rental income; into have income that each source separate source sour	Gross ine each sou (before de exclusion: \$1,000.0 \$1,400.0 \$2,040.0 \$3,560.0	of other income are alindends; money collected ived together, list it only not include income that come from tree eductions and sylvariant or come from tree educations and sylvariant or co	d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions and exclusions)  \$
Include income regardless and other public benefit pay winnings. If you are filing a List each source and the graph No Yes. Fill in the details.  The property of current ar until the date you are filing a list calendar year:  The property of current ar until the date you are filing a list calendar year:  The property of current are until the date you are filing a list calendar year:  The property of the property of the calendar year.  The property of the property of the calendar year.	of whether that incomments; pensions; joint case and you ross income from each of the sources of the social Security wild security security wild security wild security wild security security security security wild security secu	ome is taxable. E rental income; into have income that each source separate separate source separate separate source separate separate source separate separ	Gross interacts of the second	of other income are alindends; money collected ived together, list it only not include income that come from area eductions and solutions are solutions and solutions and solutions are solutions are solutions are solutions and solutions are solutions.	d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions and exclusions)  \$
and other public benefit paywinnings. If you are filing a List each source and the grant No	of whether that incomments; pensions; joint case and you ross income from each of the sources of the social Security wild social Securi	ome is taxable. E rental income; into have income that each source separate source sour	Gross ine each sou (before de exclusion: \$1,000.0 \$1,400.0 \$2,040.0 \$3,560.0	of other income are alindends; money collected ived together, list it only not include income that come from tree eductions and solutions are solutions and solutions and solutions are solutions.	d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions and exclusions)  \$

Last Name

rt 3:	List	Certain Paym	ents You	Made Before	e You Filea	for Bankruptcy		
Are eit	her De	ebtor 1's or Deb	tor 2's debt	s primarily co	onsumer debt	s?		
							e defined in 11 U.S.C. § 101	(8) 26
■ NO						nousehold purpose."	e delilled iii 11 0.5.C. § 101	(o) as
	Duri	ng the 90 days b	efore you file	ed for bankrup	otcy, did you p	ay any creditor a total of	\$6,825* or more?	
		No. Go to line 7.						
	1	the total amoun	it you paid th	nat creditor. Do	not include p	\$6,825* or more in one ayments for domestic suents to an attorney for the	upport obligations, such	
			-	-			after the date of adjustment.	
V Va	s Dah	tor 1 or Debtor	2 or both h:	ave nrimarily	consumar da	hte		
						ay any creditor a total of	\$600 or more?	
			, , , , , , , , , , , , , , , , , , ,		,, , ,	.,,		
		No. Go to line 7.						
	<b>.</b>	creditor. Do	not include	payments for o	domestic supp	\$600 or more and the to ort obligations, such as by for this bankruptcy cas		
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for.
						\$	\$	☐ Mortgage
		Creditor's Name				,		☐ Car
								Credit card
		Number Street						Loan repayment
								Suppliers or vendor
								Other
		City	State	ZIP Code				
						\$	\$	
		Creditor's Name				Ψ		
								☐ Credit card
		Number Street						
								Loan repayment
								Suppliers or vendor
		City	State	ZIP Code				Other
						\$	\$	п.,
						Ψ	Ψ	☐ Mortgage
		Creditor's Name						☐ Car
		Creditor's Name						
		Creditor's Name  Number Street						Credit card
								☐ Credit card ☐ Loan repayment
								☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor
			State	ZIP Code				☐ Credit card ☐ Loan repayment

1	Rachal Elizabeth M	lotich				Case number (if known)	
	First Name Middle Na	ame I	Last Name				
nsid orp ger uch	orations of which you are nt, including one for a but as child support and ali	s; any genera e an officer, di siness you op	l partners; rel rector, perso	latives of any on in control, or	general partners; partners; partners	artnerships of which nore of their voting :	no was an insider? In you are a general partner; securities; and any managing domestic support obligations,
☑ \ ☐ \	No Yes. List all payments to	an insider.					
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name				\$	\$	
	ilisidei s Naille						
	Number Street						
	City	State	ZIP Code				
-	Oity	Otate 1	Zii Oode		Ф.	\$	
	Insider's Name				\$	Φ	
	Number Street						
	City	State	ZIP Code				
an ir Inclu	nsider? ide payments on debts g	uaranteed or	cosigned by		Total amount	Amount you still owe	account of a debt that benefited  Reason for this payment Include creditor's name
					•		
	Insider's Name				\$	\$	
	Number Street						
	City	State 2	ZIP Code				
-	City	State .	ZIP Code				
	Insider's Name				\$	\$	
	Number Street						

City

ZIP Code

State

irst Name	Middle Name	Last Name	

Case number (if known)
------------------------

Part 4: Identify Legal Actions, Repos	sessions, and Foreclosures			
<ol> <li>Within 1 year before you filed for bankrupt List all such matters, including personal injury and contract disputes.</li> </ol>				
☐ No				
Yes. Fill in the details.				
	Nature of the case	Court or agency		Status of the case
Case title: Rachel Fanizzi v. Rachal Motich	Subrogation / uninsured motor vehicle accident; Date filed:	Summit County Court of	Common Pleas	Pending
	03/24/2016	Court Name		On appeal
		209 S. High St.		Concluded
		Number Street		Concluded
CV 2016 02 1552		Akron OH City State	ZIP Code	-
Case number CV-2016-03-1552		City State	ZIP Code	
				- Pending
Case title:		Court Name		On appeal
				Concluded
		Number Street		Concluded
		City State	ZIP Code	-
Case number		Only	211 0000	
✓ No. Go to line 11.  ☐ Yes. Fill in the information below.  Creditor's Name  Number Street	Explain what happened Property was repo Property was garm	closed. ished.	Date	Value of the property  \$
City State ZIP (	Code Property was attac	ched, seized, or levied.		
	Describe the property		Date	Value of the property
Creditor's Name				\$
Number Street	Explain what happened			
City State ZIP 0	Property was report Property was fored Property was garn Property was attacknown Property was reported Property was reported Property was forecast Property was reported Property was forecast Property Was attacknown Property Was forecast Property Was attacknown Property Was forecast Property Was attacknown Property Was forecast Prope	closed.		

	First Name	Middle Name	Last Name		Case number (if known)		
			223.12				
				did any creditor, including a ba	ank or financial institution	n, set off any am	ounts from you
l <sub>N</sub> o		to make a payn	none booduse	, you owed a dest.			
	es. Fill in the de	etails.					
			n	escribe the action the creditor took	•	Date action	Amount
					`	was taken	Amount
Cre	editor's Name						
Nice	ımber Street						\$
INU	imber Street						
Cit	tv	State Z	IP Code I	ast 4 digits of account number: X	XXX_		
511	-,	Oldio Zi	5555	act i algito of account number. A	, v v v		
thi	n 1 year before	e you filed for b	ankruptcy, w	as any of your property in the	possession of an assigne	e for the benefit	of
lΥ€							
5:	List Certai	in Gifts and C	ontribution	s			
	-	re you filed for I	bankruptcy, o	lid you give any gifts with a tot	al value of more than \$60	00 per person?	
] N	0			lid you give any gifts with a tot	al value of more than \$60	00 per person?	
N	0	re you filed for l		lid you give any gifts with a tot	al value of more than \$60	00 per person?	
No I Ye	oes. Fill in the de		ft.	did you give any gifts with a tot	al value of more than \$60	Dates you gave	Value
Ye	o es. Fill in the de	etails for each git	ft.		al value of more than \$60		Value
Ye	oes. Fill in the de	etails for each git	ft.		al value of more than \$60	Dates you gave	<b>V</b> alue
Ye	oes. Fill in the de	etails for each git	ft.		al value of more than \$60	Dates you gave	Value \$
Ye	o es. Fill in the de Gifts with a total per person	etails for each git	ft.		al value of more than \$60	Dates you gave	<b>Value</b> \$\$
Ye	o es. Fill in the de Gifts with a total per person	etails for each git	ft.		al value of more than \$60	Dates you gave	\$
Ye Pe	o es. Fill in the de Gifts with a total per person	etails for each git	ft.		al value of more than \$60	Dates you gave	\$
Pe	Gifts with a total per person  wrson to Whom You	etails for each git value of more that Gave the Gift	ft.		al value of more than \$60	Dates you gave	\$
No Pe	Gifts with a total per person  wrson to Whom You	etails for each git	ft.		al value of more than \$60	Dates you gave	\$
Pee Nu	Gifts with a total per person  wrson to Whom You	etails for each git value of more that Gave the Gift	ft.		al value of more than \$60	Dates you gave	\$
Pe Citt	es. Fill in the de Gifts with a total per person  erson to Whom You  imber Street	etails for each gift  value of more that  Gave the Gift  State Zinip to you	ft. an \$600 Delication	escribe the gifts	al value of more than \$60	Dates you gave the gifts	\$
Pe Gi	es. Fill in the de Gifts with a total per person  erson to Whom You  imber Street	etails for each git value of more that Gave the Gift	ft. an \$600 Delication		al value of more than \$60	Dates you gave	\$ \$
Pe Gi	es. Fill in the de Gifts with a total per person  Figure 1: The service of the se	etails for each gift  value of more that  Gave the Gift  State Zinip to you	ft. an \$600 Delication	escribe the gifts	al value of more than \$60	Dates you gave the gifts  Dates you gave	\$\$ \$Value
Pe Gi pe	es. Fill in the de Gifts with a total per person  Figure 1: The service of the se	etails for each gift  value of more that  Gave the Gift  State Zinip to you  value of more than	ft. an \$600 Delication	escribe the gifts	al value of more than \$60	Dates you gave the gifts  Dates you gave	\$ \$
Pe Gi pe	Gifts with a total per person  Street  Experiment of the decoration of the decoratio	etails for each gift  value of more that  Gave the Gift  State Zinip to you  value of more than	ft. an \$600 Delication	escribe the gifts	al value of more than \$60	Dates you gave the gifts  Dates you gave	\$\$ \$Value

Number Street

Official Form 107

City State ZIP Code

Person's relationship to you

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

City

Email or website address

Person Who Made the Payment, if Not You

ZIP Code

Statement of Financial Affairs for Individuals Filing for Bankruptcy

			transfer was made	payment
Person Who Was Paid				\$
Number Street				Ψ
				\$
City State ZIP Code				
Email or website address	_			
Person Who Made the Payment, if Not You				
Vithin 1 year before you filed for bankruptoromised to help you deal with your credit to not include any payment or transfer that you have a long to have a	ors or to make payments to your credi			•
	Description and value of any property tr	ansferred	Date payment or transfer was made	Amount of payme
Person Who Was Paid				\$
Number Street				•
				\$
City State ZIP Code				
vitnin 2 years before you filed for bankrup		• • • •	•	
Vithin 2 years before you filed for bankrup ransferred in the ordinary course of your I nolude both outright transfers and transfers no not include gifts and transfers that you have No  Yes. Fill in the details.	nade as security (such as the granting of	a security interest or mo	or payments received	
ransferred in the ordinary course of your Include both outright transfers and transfers no not include gifts and transfers that you have No	nade as security (such as the granting of we already listed on this statement.  Description and value of property	Describe any property of	or payments received	Date transfer
ransferred in the ordinary course of your Include both outright transfers and transfers no not include gifts and transfers that you have No  Yes. Fill in the details.	nade as security (such as the granting of we already listed on this statement.  Description and value of property	Describe any property of	or payments received	Date transfer
ransferred in the ordinary course of your Include both outright transfers and transfers in the notinclude gifts and transfers that you have No Yes. Fill in the details.  Person Who Received Transfer	nade as security (such as the granting of we already listed on this statement.  Description and value of property	Describe any property of	or payments received	Date transfer
ransferred in the ordinary course of your Include both outright transfers and transfers in Do not include gifts and transfers that you have No  Yes. Fill in the details.  Person Who Received Transfer  Number Street	nade as security (such as the granting of we already listed on this statement.  Description and value of property	Describe any property of	or payments received	Date transfer
ransferred in the ordinary course of your Include both outright transfers and transfers in Do not include gifts and transfers that you have No  Yes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code	nade as security (such as the granting of we already listed on this statement.  Description and value of property	Describe any property of	or payments received	Date transfer
ransferred in the ordinary course of your Include both outright transfers and transfers in Do not include gifts and transfers that you have No  Yes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you	nade as security (such as the granting of we already listed on this statement.  Description and value of property	Describe any property of	or payments received	Date transfer
ransferred in the ordinary course of your Include both outright transfers and transfers in Do not include gifts and transfers that you have No No Yes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you	nade as security (such as the granting of we already listed on this statement.  Description and value of property	Describe any property of	or payments received	Date transfer

City

Name of Financial Institution

State

ZIP Code

Number Street

Statement of Financial Affairs for Individuals Filing for Bankruptcy

ZIP Code

Name

City

Number Street

State

page 9

Rachal Elizabeth Motich			
Debtor 1 First Name Middle Name	Last Name	Case number (if known)	
22. Have you stored property in a storage  V No  Yes. Fill in the details.	unit or place other than your home w	ithin 1 year before you filed for bankrupto	cy?
	Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility	Name		□ No □ Yes
Number Street	Number Street		
City Chate 7/10 C	City State ZIP Code		
City State ZIP C	ode		I
Part 9: Identify Property You H	Hold or Control for Someone Else		_
23. Do you hold or control any property to or hold in trust for someone.  ✓ No  ✓ Yes. Fill in the details.	that someone else owns? Include any	property you borrowed from, are storing	for,
	Where is the property?	Describe the property	Value
Owner's Name			\$
Number Street	Number Street		
City State ZIP C		ZIP Code	
Part 10: Give Details About Env	vironmental Information		
hazardous or toxic substances, was	al, state, or local statute or regulation o	concerning pollution, contamination, rele surface water, groundwater, or other med ces, wastes, or material.	
Site means any location, facility, or p it or used to own, operate, or utilize i		mental law, whether you now own, operat	te, or utilize
<ul> <li>Hazardous material means anything substance, hazardous material, pollu</li> </ul>		zardous waste, hazardous substance, tox	kic
Report all notices, releases, and procee	dings that you know about, regardless	s of when they occurred.	
24. Has any governmental unit notified y	ou that you may be liable or potentially	y liable under or in violation of an environ	nmental law?
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	_	

City

Number Street

State

ZIP Code

Statement of Financial Affairs for Individuals Filing for Bankruptcy

State ZIP Code

page **10** 

Number Street

City

First Name	Middle Name	Loot Name	

Case number	(if known)				
-------------	------------	--	--	--	--

25. Have you notified any governmental unit of	any release of hazardous materia	l?	
<ul><li>✓ No</li><li>✓ Yes. Fill in the details.</li></ul>			
_ res.r.ii iii die details.	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Code			
26. Have you been a party in any judicial or adr	ninistrative proceeding under any	environmental law? Include settlem	ents and orders.
☑ No			
Yes. Fill in the details.			2011
	Court or agency	Nature of the case	Status of the case
Case title		_	☐ Pending
	Court Name		☐ On appeal
	Number Street	_	☐ Concluded
Casa mumbar			
Case number	City State ZIP Cod	le	
Part 11: Give Details About Your Bus	iness or Connections to Any	Business	
27. Within 4 years before you filed for bankrup	tcy, did you own a business or ha	ve any of the following connections	to any business?
A sole proprietor or self-employed i			
<ul><li></li></ul>	any (LLC) or limited liability partn	ership (LLP)	
☐ A partner in a partnership ☐ An officer, director, or managing ex	ecutive of a corporation		
☐ An owner of at least 5% of the votin	•	tion	
✓ No. None of the above applies. Go to Pa			
Yes. Check all that apply above and fill		ness.	
	Describe the nature of the business		
Business Name		Do not include Soc	ial Security number or ITIN.
Number Street		EIN:	
Number Street		Dates business exi	sted
	Name of accountant or bookkeeper	From	То
City State ZIP Code			10
	Describe the nature of the business		
Business Name		Do not include Soc	ial Security number or ITIN.
		EIN:	
Number Street		Dates business exi	sted
	Name of accountant or bookkeeper		_
City State ZIP Code		From	То

First Name Middle Name	Last Name	
	Describe the nature of the busi	ness Employer Identification number  Do not include Social Security number or IT
Business Name		EIN:
Number Street		Dates business existed
	Name of accountant or bookke	Pper To
thin 2 years before you filed stitutions, creditors, or other	for bankruptcy, did you give a financial star	From To  tement to anyone about your business? Include all financial
thin 2 years before you filed stitutions, creditors, or other	for bankruptcy, did you give a financial star	110III 110
thin 2 years before you filed stitutions, creditors, or other	for bankruptcy, did you give a financial sta parties.	110III 110
thin 2 years before you filed stitutions, creditors, or other No Yes. Fill in the details below	for bankruptcy, did you give a financial star parties. v.	110III 110
thin 2 years before you filed stitutions, creditors, or other No Yes. Fill in the details below	for bankruptcy, did you give a financial star parties. v.	110III 110

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

★ /s/ Rachal Elizabeth Motich	*
Signature of Debtor 1	Signature of Debtor 2
Date <u>04/25/2019</u>	Date
Did you attach additional pages to Your Statemer	nt of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
✓ No	
Yes	
Did you pay or agree to pay someone who is not a	an attorney to help you fill out bankruptcy forms?

Official Form 107

✓ No

☐ Yes. Name of person\_

Statement of Financial Affairs for Individuals Filing for Bankruptcy

. Attach the *Bankruptcy Petition Preparer's Notice*, *Declaration*, *and Signature* (Official Form 119).

Fill in this in	formation to ide	entify your case:		
Debtor 1	Rachal Elizabeth			
202007	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	) First Name	Middle Name	Last Name	
United States	Bankruptcy Court for	or the Northern District of Ohio		
Case number			(/	
(If known)				
1				

## Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

12/15

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of <i>Schedule D: C</i> information below.	Creditors Who Have Claims Secured by Property (Offic	ial Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name:	Surrender the property.	□No
Description of property securing debt:	<ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	Yes
Creditor's name:  Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes
Creditor's name:  Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes
Creditor's name:  Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes

Describe your unexpired personal property leases	Will the lease be assumed?
essor's name:	□No
escription of leased roperty:	Yes
essor's name:	□No
escription of leased roperty:	□Yes
essor's name:	□No
escription of leased roperty:	Yes
essor's name:	☐ No
escription of leased roperty:	Tes
essor's name:	□No
escription of leased roperty:	Yes
essor's name:	□No
escription of leased roperty:	Yes
essor's name:	□No
escription of leased roperty:	Yes
Sign Below  der penalty of perjury, I declare that I have indicated my intention about any pro	

 $\mathsf{Date} \ \frac{\mathsf{04/25/2019}}{\mathsf{MM} \ / \ \mathsf{DD} \ \ / \ \ \mathsf{YYYY}}$ 

Date MM / DD / YYYY

Fill in this information to identify your case:						
Debtor 1	Rachal Elizabeth Motich					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States E Case number (If known)	Bankruptcy Court fo	r the Northern District of Ohio				

Check one box only as directed in this form a	nd in
Form 122A-1Supp:	

- 1. There is no presumption of abuse.
- 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A–2).
- 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

#### Official Form 122A-1

#### **Chapter 7 Statement of Your Current Monthly Income**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

#### Part 1: Calculate Your Current Monthly Income

1.	☑ Not	s your marital and filing status? Check one only.  It married. Fill out Column A, lines 2-11.  It married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.  It with and your spouse is NOT filing with you. You and your spouse are:  Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.		
		<b>Living separately or are legally separated</b> . Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).		
	Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this			

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
Your gross wages, salary, tips, bonuses, overtime, an (before all payroll deductions).	d commissions	\$ 0.00	\$0.00
Alimony and maintenance payments. Do not include pa Column B is filled in.	yments from a spouse if	\$_0.00	\$ <u>0.00</u>
4. All amounts from any source which are regularly paid of you or your dependents, including child support. In from an unmarried partner, members of your household, y and roommates. Include regular contributions from a spou filled in. Do not include payments you listed on line 3.	clude regular contributions our dependents, parents,	\$ <u>0.00</u>	\$ <u>0.00</u>
Net income from operating a business, profession, or farm     Gross receipts (before all deductions)	Debtor 1 Debtor 2 \$0.00 \$ 0.00		
Ordinary and necessary operating expenses  Net monthly income from a business, profession, or farm	- \$ <u>0.00</u> - \$ <u>0.00</u> \$ <u>0.00</u> \$ <u>0.00</u> Copy	\$_0.00	\$_0.00
Net income from rental and other real property     Gross receipts (before all deductions)     Ordinary and necessary operating expenses	Debtor 1 Debtor 2 \$0.00 \$0.00 - \$0.00 - \$0.00		
Net monthly income from rental or other real property  7. Interest, dividends, and royalties	\$0.00 \$ 0.00 Copy here→	\$_0.00 \$_0.00	\$ <u>0.00</u> \$ <u>0.00</u>

De	ht	O	r	1

#### Rachal Elizabeth Motich

First Name

Middle Name

Last Name

Case number (if known)\_

			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
8.	Unemployment compensation		\$_0.00	\$0.00	
	Do not enter the amount if you contend that the amount r under the Social Security Act. Instead, list it here:  For you  For your spouse	\$ <u>0.00</u>			
9.	<b>Pension or retirement income.</b> Do not include any amo benefit under the Social Security Act.	ount received that was a	\$0.00	\$ <u>0.00</u>	
10.	Income from all other sources not listed above. Speci Do not include any benefits received under the Social Se as a victim of a war crime, a crime against humanity, or in terrorism. If necessary, list other sources on a separate p	ecurity Act or payments received nternational or domestic	d		
	Food stamps		\$ <u>291.67</u>	\$ <u>0.00</u>	
	WIC		\$ <u>141.67</u>	\$ <u>0.00</u>	
	Total amounts from separate pages, if any.		+ \$0.00	+ \$0.00	
11.	Calculate your total current monthly income. Add line column. Then add the total for Column A to		\$ <u>433.33</u>	<b>+</b> \$0.00	= \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Pa	rt 2: Determine Whether the Means Test App	olies to You			monthly income
12.	Calculate your current monthly income for the year. F	Follow these steps:		_	
	12a. Copy your total current monthly income from line 1	1		Copy line 11 here→	\$ 433.33
	Multiply by 12 (the number of months in a year).				<b>x</b> 12
	12b. The result is your annual income for this part of the	e form.		12b.	\$ 5,199.96
13.	Calculate the median family income that applies to yo	ou. Follow these steps:			
	Fill in the state in which you live.	ОН			
	Fill in the number of people in your household.	4		Γ-	00.454.00
	Fill in the median family income for your state and size of To find a list of applicable median income amounts, go of instructions for this form. This list may also be available a	nline using the link specified in t		13.	\$ 89,454.00
14.	How do the lines compare?				
	14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse.  Go to Part 3.				
	14b. Line 12b is more than line 13. On the top of pag Go to Part 3 and fill out Form 122A–2.	e 1, check box 2, The presump	tion of abuse is de	etermined by Form 122A	-2.
Pa	rt 3: Sign Below				
By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.					
	✗/s/ Rachal Elizabeth Motich	<b>x</b>			
	Signature of Debtor 1	Sig	nature of Debtor 2		
	Date <u>04/25/2019</u> MM / DD / YYYY	Dat	MM / DD / YY	YY	
	If you checked line 14a, do NOT fill out or file Form 122A–2.				
	If you checked line 14b, fill out Form 122A–2				

Ability Recovery Services PO Box 4031 Wyoming, PA 18644

Allstate PO Box 21169 Roanoke, VA 24018

Allstate Insurance Company P.O. Box 218 Camby, IN 46113-0218

Angela Fanizzi 3898 Sprucehaven Street, NW Uniontown, OH 44685

Emergency Services of Central Ohio 155 5TH ST NE Barberton, OH 44203

Enhanced Recovery Company PO Box 57547 Jacksonville, FL 32241

First Federal Credit Control 2470 Chagrin Blvd 205 Cleveland, OH 44112

Huntington Bank 17 S High St Columbus, OH 43218

Jack Morrison One Cascade Plaza Suite 1510 Akron, OH 44308

Keis George 55 Public Square Ste 800 Cleveland, OH 44113

Keis George 55 Public Sq 800 Cleveland, OH 44113

Key Bank 127 Public Square Cleveland, OH 44114

Ohio BMV Attn: Compliance Unit P.O. Box 16583 Columbus, OH 43216

Sprint 6200 Sprint Pkwy Shawnee Mission, KS 66251

Summa Emergency Associates Inc 3730 Tobs Dr Uniontown, OH 44685

### United States Bankruptcy Court Northern District of Ohio

In re: Rachal Elizabeth Motich	Case No.		
Debtor(s)	Chapter 7		
Verification of Creditor Matrix			
The above-named Debtor(s) true and correct to the best of their k	hereby verify that the attached list of creditors is knowledge.		
Date: <u>04/25/2019</u>	/s/ Rachal Elizabeth Motich		
	Signature of Debtor  Signature of Joint Debtor		

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
	administrative fee	

\$335 total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

trustee surcharge

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law.

Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

## Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Notice Required by 11 U.S.C. U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 3

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition* for *Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

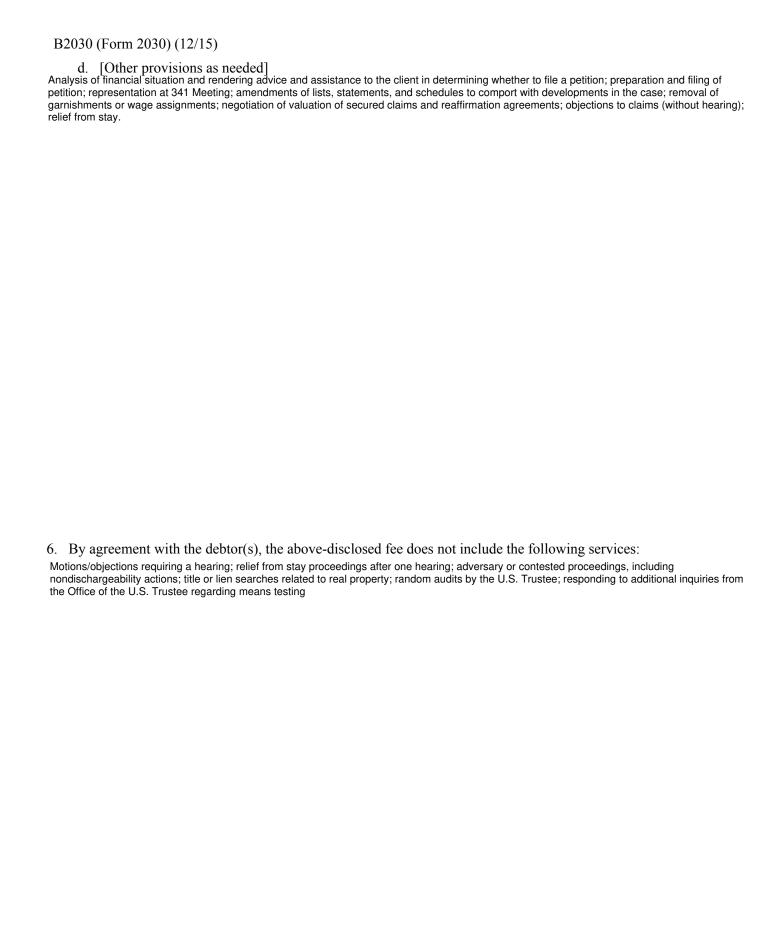
## United States Bankruptcy Court

Northern District of Ohio

I	In re Rachal Elizabeth Motich	
		Case No.
D	Debtor	Chapter_7
	DISCLOSURE OF COMPENSATION OF A	TTORNEY FOR DEBTOR
1	1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) above named debtor(s) and that compensation paid to me v petition in bankruptcy, or agreed to be paid to me, for servithe debtor(s) in contemplation of or in connection with the	within one year before the filing of the ces rendered or to be rendered on behalf of
v <u>F</u>	FLAT FEE	
	For legal services, I have agreed to accept	\$ <u></u>
	Prior to the filing of this statement I have received	\$ <u>700.00</u>
	Balance Due	\$ <u>0.00</u>
<u>F</u>	RETAINER	
	For legal services, I have agreed to accept a retainer of	\$
	The undersigned shall bill against the retainer at an hourly	rate of\$
	[Or attach firm hourly rate schedule.] Debtor(s) have agree approved fees and expenses exceeding the amount of the re-	d to pay all Court
2.	. The source of the compensation paid to me was:	
	Debtor Other (specify)	
3.	. The source of compensation to be paid to me is:	
	Debtor Other (specify)	
4.	I have not agreed to share the above-disclosed compeare members and associates of my law firm.	ensation with any other person unless they
	I have agreed to share the above-disclosed compensation of members or associates of my law firm. A copy of the Age of the people sharing the compensation is attached.	
5.	. In return of the above-disclosed fee, I have agreed to render bankruptcy case, including:	legal service for all aspects of the
	<ul><li>a. Analysis of the debtor's financial situation, and rendering whether to file a petition in bankruptcy;</li><li>b. Preparation and filing of any petition, schedules, statem required;</li></ul>	

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any

adjourned hearings thereof;



# CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. O4/25/2019 /s/ Rebecca Sremack, 0092313 Date Signature of Attorney

Name of law firm 2745 S. Arlington Rd: Akron, OH 44312 rebecca@sremacklaw.com

Sremack Law Firm LLC